

BUSINESS DECLARATION

1 Name of Firm: _____ Tax Identification No.: _____

2 Address of Firm: _____ DUNS No.: _____

3 a. Telephone Number of Firm: _____ b. Fax Number of Firm: _____

4 a. Name of Person Making Declaration _____

b. Telephone Number of Person Making Declaration _____

c. Position Held in the Company _____

5 Controlling Interest in Company (*"X" all appropriate boxes*)

☐ a. Black American ☐ b. Hispanic American ☐ c. Native American ☐ d. Asian American

☐ e. Other Minority (*Specify*) _____ ☐ f. Other (*Specify*) _____

☐ g. Female ☐ h. Male ☐ i. 8(a) Certified (*Certification letter attached*) ☐ j. Service Disabled Veteran Small Business

6 Is the person identified in Number 4 above, responsible for day-to-day management and policy decision making, including but not limited to financial and management decisions?

☐ a. Yes ☐ b. No (*If "NO," provide the name and telephone number of the person who has this authority.*) _____

7 Nature of Business (*Specify all services/products (NAIC)*) _____

8 (a) Years the firm has been in business _____ (b) No. of Employees _____

9 Type of Ownership: ☐ a. Sole Ownership ☐ b. Partnership

☐ c. Other (*Explain*) _____

10 Gross receipts of the firm for the last three years:

a.1. Year Ending: _____	b.1. Gross Receipts _____
a.2. Year Ending: _____	b.2. Gross Receipts _____
a.3. Year Ending: _____	b.3. Gross Receipts _____

11 Is the firm a small business? ☐ a. Yes ☐ b. No

12 Is the firm a service disabled veteran owned small business? ☐ a. Yes ☐ b. No

13 Is the firm a socially and economically disadvantaged small business? ☐ a. Yes ☐ b. No

I DECLARE THAT THE FOREGOING STATEMENTS CONCERNING _____ ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF. I AM AWARE THAT I AM SUBJECT TO CRIMINAL PROSECUTION UNDER THE PROVISIONS OF 18 USCS 1001.

14. a. Signature _____ b. Date: _____

c. Typed Name _____ d. Title: _____